

County Health Officer Questionnaire
Chronic Disease Prevention at the County Level
UCSF/IHA & DHS California Arthritis Partnership Program

1. What are the top five health issues for the Health Department? (in any order) For each issue, is there a program/bureau/department in place to address the issue?

Issue	Program? Yes	No
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1

2

3

4

5

2. How do you think your county's demographics will change in the next 10 years? Will the top five health issues change?

3. Approximately what percent of the health department's budget is spent addressing chronic diseases?

%

4. Based on your answer to Question 3* Over the next 10 years, the health department should _____ its role in addressing chronic disease:

___ Greatly increase

___ Slightly increase

___ Maintain

___ Slightly decrease

___ Greatly decrease

___ (Don't know)

5. What is your health department's current funding mix?

____ % County

____ % State

___ % Federal

___ % Foundations/private

____ % Other, (please specify): _____

6. Do you feel local politics strongly influence health department priorities?

Yes ☐

No ☐

7. Which phrase most closely resembles the relationship between the Health Department, County Administrator and the Board of Supervisors?

_____ Cooperative

Adversarial

Effective

Ineffective

Slow-moving

___ Responsive

___ No relationship

Other, please explain:

8. What chronic conditions are currently being addressed by the County? What are their corresponding programs/activities?

Chronic Condition

Programs

[illegible]

9. Does your health department have or plan to have programs specifically developed for arthritis and/or osteoporosis prevention and care?

Yes ☐

No ☐

If "Yes", what are or will be the arthritis/osteoporosis programs/activities? And does or will the health department partner with any organizations to implement them?

If "No", How can arthritis and osteoporosis prevention and care become priorities for your health department?

10. Is there an organization or provider in your county you feel would be more appropriate than your county health department working on arthritis and osteoporosis prevention and care?

Yes ☐

No ☐

If "Yes", which organization or provider? _____

If your health department had an arthritis or osteoporosis program ...

11. What would you want it to be able to do?
(rank with "1" having the highest priority and "5" lowest priority)

___ Policy ___ Epidemiology
___ Programs ___ Funding Development
___ Other, please specify: _____

12. If the state offered technical assistance/toolkit support, which of the following would be useful to your program?

1. Very useful

2. Somewhat useful

3. Not very useful

4. Not useful at all

- ☐ Email technical assistance
☐ Telephone technical assistance
☐ Video conferencing/training
☐ Conference calls addressing general concerns
☐ Website housing recent and relevant articles and publications
☐ Funding research / grant writing
☐ Listserv
☐ Regular mailings
☐ Statewide conferences/trainings
☐ Media/marketing materials
☐ Regional trainings
☐ Other (please specify) _____

13. Are you familiar with the CA DHS' California Arthritis Partnership Program (CAPP) and the California Osteoporosis Prevention and Education Program (COPE)?

Yes ☐

No ☐

14. The California Arthritis Partnership Program (CAPP) and the California Osteoporosis Prevention and Education Program (COPE) are in the process of developing a technical assistance toolkit for developing, implementing and sustaining arthritis/osteoporosis care and prevention programs at the local level.

How important are the following when developing, implementing and sustaining a new health program?

1. Very important

2. Somewhat important

3. Not very important

4. Not important at all

- ☐ Evaluation
☐ Program development
☐ Partnership development
☐ Media advocacy
☐ Funding research / grant writing
☐ Social marketing
☐ Program Marketing
☐ Other, please specify: _____

15. How proficient is your health department at the following activities?

1. Very proficient 2. Somewhat proficient 3. Not very proficient 4. Not proficient at all

- ___ Evaluation
- ___ Program development
- ___ Partnership development
- ___ Media Advocacy
- ___ Funding research / grant writing
- ___ Social marketing
- ___ Program Marketing
- ___ Other, please specify: _____

Name: _____ **Title:** _____

County: _____